

Family Caregiver Support Program (FCSP)

Purpose and Legislation

Title III, Section 316 of the Older Americans Act creates the National Family Caregiver Support Program (NFCSP)(Title III-E). In Wisconsin, services are to be provided by or contracted through the local aging unit. The program provides for multifaceted systems of support services for (1) family caregivers; and (2) for grandparents or older individuals that are relative caregivers. The intent of the program is to provide information, support and assistance to family caregivers. No more than 20% of this funding may be used to provide supplemental direct services to the individual needing care. Temporary respite is not included in the 20% for direct services neither can temporary respite be provided on an on-going basis.

The Wisconsin Alzheimer's Family Caregiver Support Program (AFCSP) is one of the programs used as a model for the NFCSP. It is the intent of the Older Americans Act that information and services be provided to family caregivers in a direct and helpful manner. It is, therefore, in the best interest of family caregivers that both Title III-E and AFCSP be administered by the same agency. At a minimum, coordination of these two programs is essential to maximize the dollars available for family caregivers and avoid duplication of services.

Definitions

- (1) **“Child”** is defined as an individual not more than 18 years of age
- (2) **“Family Caregiver”** is defined as an adult family member, or another individual, who is an informal provider of in-home and community care to an older individual. [A **minimum of 90%** of the county's NFCSP allocation **must** be spent on serving family caregivers.]
- (3) **“Grandparent or Older Individual who is a Relative Caregiver”** is defined as a grandparent or step-grandparent of a child, or a relative of a child by blood or marriage, who is 60 years of age or older and –
 - (A) lives with the child;
 - (B) is the primary caregiver of the child because the biological or adoptive parents are unable or unwilling to serve as the primary caregiver of the child; and,
 - (C) Has a legal relationship to the child, such as legal custody or

- (5) **“Assistance”** is defined as one-on-one contact to provide:
 - (A) Information and Assistance: A service that provides current information on opportunities and services available; assesses the problems and capacities of the individuals; links the individuals to the opportunities and services available; to the maximum extent practicable, ensures that the individuals receive the services needed, and are aware of the opportunities available to the individuals by establishing adequate follow-up procedures.
 - (B) Case management: Assistance either in the form of access or care coordination in circumstances where the older person or their caregivers are experiencing diminished functioning capacities, personal conditions or other characteristics which require the provision of services by formal service providers. Activities of case management include assessing needs, developing care plans, authorizing services, arranging services, coordinating the provision of services among providers, follow-up and reassessment, as required.
- (6) **“Counseling/Support Groups/Training”** Provision of advice, guidance and instruction about options and methods for providing support to caregivers in an individual or group setting.
- (7) **“Respite”** Temporary, substitute supports or living arrangements to provide a brief period of relief or rest for caregivers. It can be in the form of in-home respite, adult day care respite, or institutional respite for an overnight stay on an intermittent, occasional or emergency basis.
- (8) **“Temporary”** Not more than seven consecutive days, nor more than fourteen days in a calendar year.
- (9) **“Limited Basis”** Not more than once per week (or a total of 8 hours/wk)
- (10) **“Supplemental services”** Other services to support the needs of caregivers, on a limited basis.
 - (A) Personal Care - Providing personal assistance, stand-by assistance, supervision or cues for people having difficulties with one or more of the following activities of daily living: eating, dressing, bathing, toileting, and transferring in and out of bed.
 - (B) Homemaker - Providing assistance to people having difficulty with one or more of the following instrumental activities of daily living: preparing meals, shopping for personal items, managing money, using the telephone, or doing light housework.
 - (C) Chore - Providing assistance to people having difficulty with one or

and services such as rehabilitation, medications assistance and home health aide services for adult day health.

- (E) Nutrition Counseling - Provision of individualized advice and guidance to individuals or family caregivers who are at nutritional risk, because of their health or nutritional history, dietary intake, medication use or chronic illness. Counseling may include options and methods for improving nutritional status, performed by a health professional in accordance with state policy.
- (F) Assisted Transportation - Provision of assistance, including escort, to a person who has difficulties (physical or cognitive) using regular vehicular transportation.
- (G) Transportation - Provision of a means of transportation for a person from one location to another. Does not include any other activity.
- (H) Other - All services other than those listed above and may include small home modifications, adaptive aids, professional visits by RN, PT or OT.

Minimum Requirements for Services

The services may be provided directly by the aging unit or may be purchased through a contract and shall include all five of the Minimum Requirements for Services:

- (1) Information to caregivers about available services;
- (2) Assistance to caregivers in gaining access to the services;
- (3) Individual counseling, organization of support groups, and training to caregivers to assist in making decisions and solving problems relating to their caregiver roles;
- (4) Respite care to enable caregivers to be temporarily relieved from their caregiving responsibilities; and,
- (5) Supplemental services, on a limited basis, to complement the care provided by caregivers. These services are not to exceed 20% of the county allocation. Aging units may use funds to hire staff to provide the five services to caregivers. Staff or sub-contractors funded with these resources must work on behalf of family caregivers.

Coordination of Services

the Family Caregiver Support Program and the Alzheimer Family Caregiver Support Program, preferably with other Title III programs.

When there is a concern over the use of limited resources for respite care and supplemental services, aging units, with the advice and consultation of their controlling committee and/or a caregiver advisory committee may further limit the amount of services provided to an individual caregiver. This local policy decision should be in writing and uniform for all caregivers.

Aging units may contract for all or part of the services required under the NFCSP. If the aging unit contracts for caregiver support services, formal contracts should be used, should meet the contract requirements found in Chapter VI, Contract Administration, and Chapter V, Fiscal Management of *The Policies and Procedures Manual of the Wisconsin Aging Network* and should assure:

- 1) The contract agency can demonstrate interagency coordination,
- 2) The contract agency has in place a mechanism for targeting individuals in the greatest social and economic need, and
- 3) The contract agency has the capacity to collect necessary data to demonstrate persons receiving direct services under (4) and (5) listed under “Minimum Requirements of Services” above meet the eligibility criteria found under (3) “Restrictions on Use of Funding”.
- 4) The contract agency has a procedure in place to report and manage program income generated.

In instances where the aging unit contracts for all or part of the services, they must still assure that all five of the minimum requirements for services are met either by a single contract or a combination of direct service provision and contracts.

Maintenance of Effort - Non-Supplanting

The intent of the maintenance of effort provision under Section 374 is for Title III-E funds to be spent in addition to and not supplant any Federal, State or local government **funds** (including an area agency on aging) currently being used to provide services to caregivers described in Section 373. (Maintenance of effort provision must be maintained by money, not in-kind)

Restrictions On Use Of Funding

- (1) No more than 10% of this funding may be used to support grandparents (60+) and older individuals who are relative caregivers who are providing care for their grandchildren (under age 19).
- (2) No more than 20% of this funding may be used for supplemental services
- (3) To be eligible to receive respite care and supplemental services, family caregivers must be providing in-home and community care to older individuals who meet the following definition of “frail” as outlined in subparagraph (A)(I) or (B) of Section 102(28) of the Older Americans Act:

The term “frail” means that the older individual is determined to be functionally impaired because:

- a) he/she is unable to perform at least two activities of daily living without substantial human assistance, including verbal reminding, physical cueing or supervision; or
- b) due to cognitive or mental impairment, the individual requires substantial supervision due to behavior that poses a serious health or safety hazard to the individual or another

Agencies providing either respite or supportive services shall use a functional screen document that is able to capture the required information.

NOTE: The functional screen provision does not apply to grandparents or other older individuals who are relative caregivers of children not more than 18 years of age who are requesting respite care and/or supplemental services.

- (4) Priority shall be given to individuals who are currently not receiving caregiver support services under the Wisconsin Alzheimer’s Family Caregiver Support Program (AFCSP).
- (5) Funding shall not be used to provide adult day-care on a regular, on-going basis.
- (6) Funding shall not be used to provide respite or day-care services for individuals currently receiving other home and community-based services funding (COP, CIP, COP-W, etc.) which can pay for respite and day-care.

Distribution

demonstrate that no other source of funds is available to provide the necessary services. The area agency on aging may grant a waiver to an aging unit to exceed the limitations of temporary or limited services on a case by case basis.

Outcome Measures/Reporting Requirements

Reporting requirements will be the same as for other Title III funded services and reporting formats and outcome measures will be forthcoming.

Required Match

This program requires a match of 25% non-federal dollars. State and local funding not currently used to match other programs may be used as match. The state AFCSP money may be used as match to this program. Match may also be in the form of in-kind.

Cost Share/Program Income

There will be no cost share provision for caregiver programs; participants may donate towards the cost of services provided. Older Americans Act requirements for program income shall apply to Title III-E donations.

Capacity Building

In the first year (2001) of implementation, it may be necessary for aging units to build the capacity of their information and assistance program and invest in staff development. Both of these activities are allowable.

Software/Hardware – purchases necessary to implement the Family Caregiver Program are allowable. If the cost of the individual item of software or hardware exceeds \$1,000, prior approval from the area agency is required.

Staff Training and Development - is an allowable cost. This may include the cost of training (registration, mileage, meals and lodging), purchase of training materials and resources.

Plan Amendments Requirements

In subsequent years, this will be a program priority in aging plans. Area agencies on aging and aging units should plan accordingly.

Tribal Aging Units

Tribal Aging Units will be eligible to receive caregiver program money under Part C of Title VI the Native American Caregiver Support Program